

EXHIBIT 120



DEA Update Market Leadership Meeting

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Director, Pharmaceutical Integrity

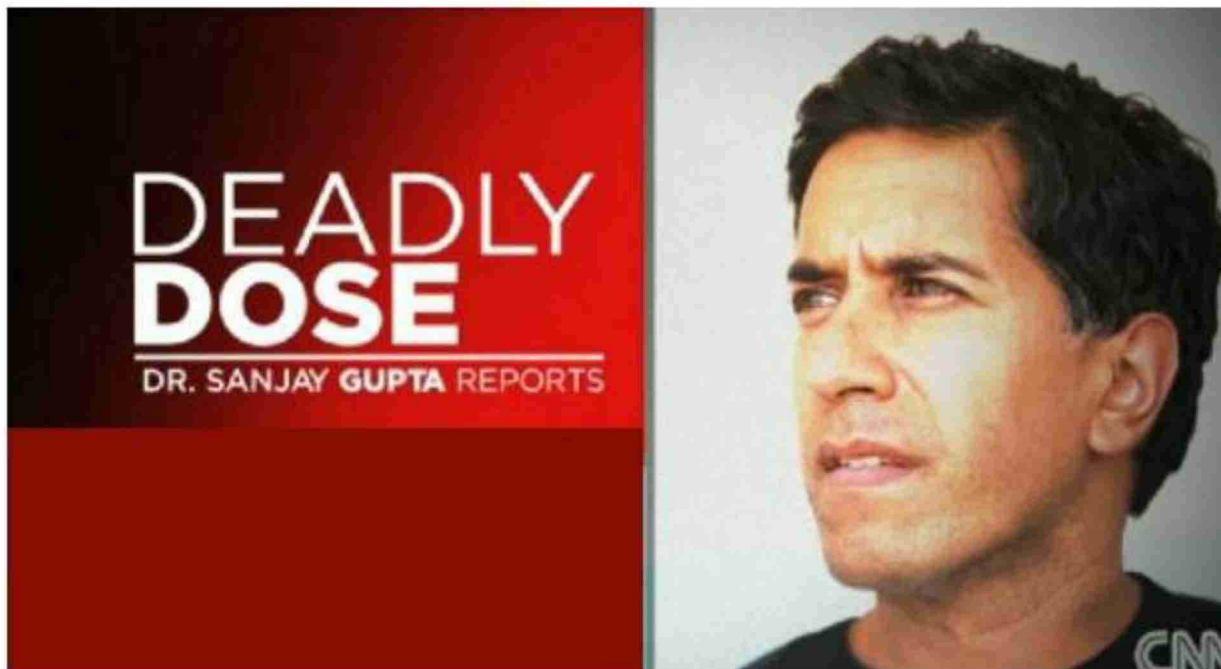
January 2012

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Walgreens
AT THE CORNER OF **HAPPY** & **HEALTHY**



The New HOT Topic



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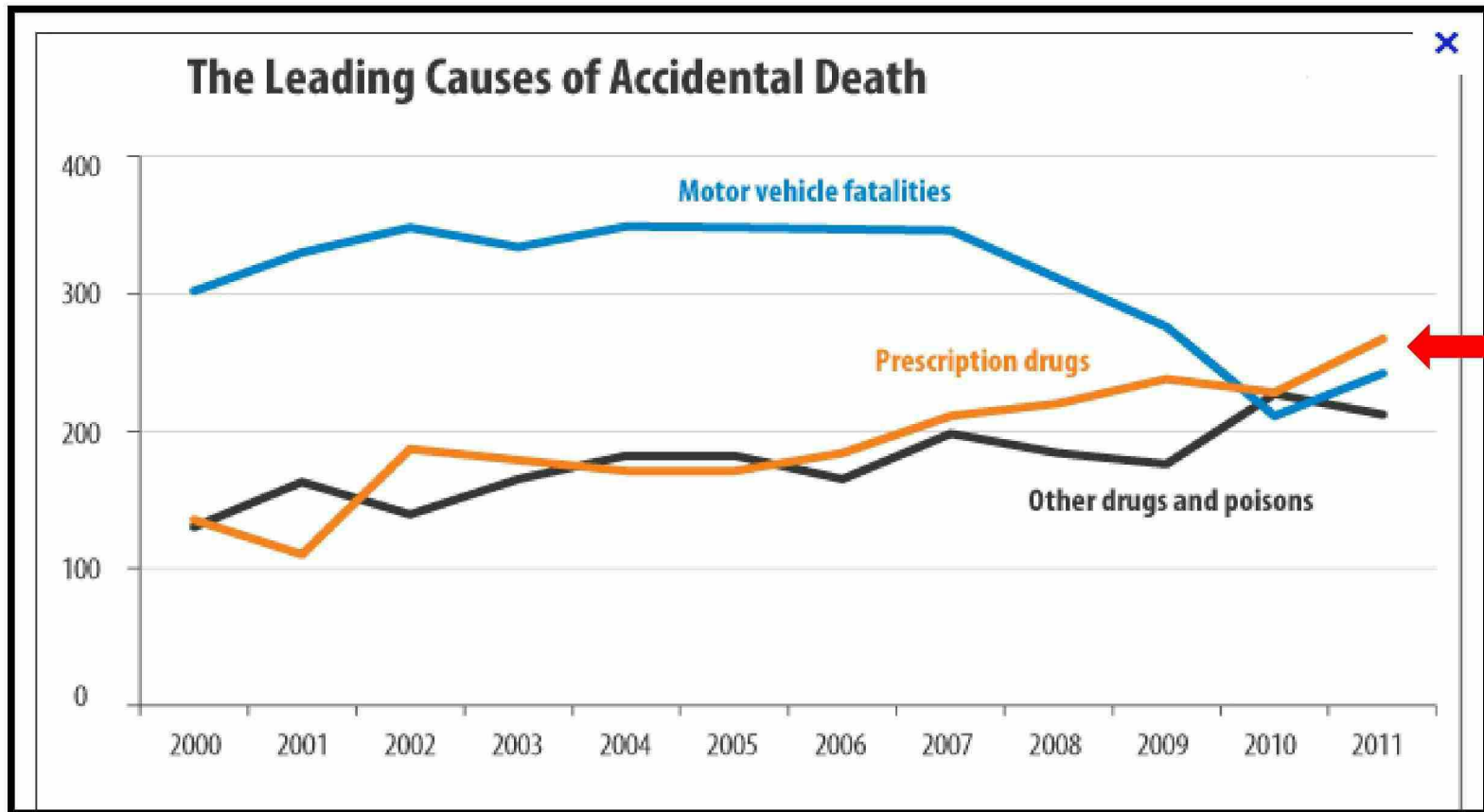
Florida Pill Mill Busts



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Leading Cause of Death - Prescription Drugs



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Title 21 Code of Federal Regulations

Section 1306.04 Purpose of issue of prescription.

*(a) A prescription for a controlled substance to be effective must be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his professional practice. The responsibility for the proper prescribing and dispensing of controlled substances is upon the prescribing practitioner, **but a corresponding responsibility rests with the pharmacist who fills the prescription.** An order purporting to be a prescription issued not in the usual course of professional treatment or in legitimate and authorized research is not a prescription within the meaning and intent of section 309 of the Act (**21 U.S.C. 829**) and the person knowingly filling such a purported prescription, as well as the person issuing it, shall be subject to the penalties provided for violations of the provisions of law relating to controlled substances.*



Timeline of Events

Pre-August
2010

- Steady increase in FL pill mills
- Prescribers dispensing medications

October
2010

- Change in Florida legislation restricts prescriber dispensing to only 72 hour supply of pain medications

October 10-
March 11

- Dramatic increase in the number of opioid pain medications prescriptions seen at retail stores

July 2011

- Florida law amended to prohibit practitioners from dispensing C2-3, except in very limited instances

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Timeline 2012

April 2012

- Administrative Inspection Warrants were served on 6 stores and the Jupiter DC

May –June
2012

- 8 stores voluntarily removed all C-II products, Xanax and Soma
- Re-launch of Good Faith Dispensing Policy

September
2012

- ISO was issued for the Jupiter DC

November
2012

- Order to Show Cause issued to 3 of the original Florida pharmacies

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Timeline

December
2012

- Target Drug GFD pilot begins in FL and Vegas

January
2013

- Sanction prescriber pilot begins NJ and PA

February
2013

- DEA administrative hearing begins



Operational Steps Taken

- In June, we re-launched our Good Faith Dispensing Policy across the Chain
- Pilots
 - Target Drug Good Faith Dispensing in FL and NV
 - Prescriber Sanctioning in NJ and PA
 - 8 prescribers total
- Invalid Prescriber DEA removal from IC+

Reporting Tools

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Expired DEA CAP Override

Rx #	Store	Sold Date	Campaign ID	DEA #	Prescriber First Name	Prescriber Last Name	Drug	RPH	Consult Completed Date	Comments	Sold?
1491441	Xxxx	12/28/2012	Doctor Suspension	XX1234567	First	Last	OXYCODONE 30MG IMMEDIATE REL TABS	EXW	12/28/12 7:20 PM	Consultation Completed:	YES
1900255	Xxxx	12/26/2012	Doctor Suspension	XX1234567	First	Last	CONTOUR TEST STRIPS 100'S	NAH	12/26/12 1:33 PM	Consultation Completed:	YES
3002349	Xxxx	12/26/2012	Doctor Suspension	XX1234567	First	Last	VIT D 50,000 IU D2 (ERGO) CAPS (RX)	ERL	12/26/12 12:01 PM	Consultation Completed:	YES
3017623	xxxx	12/26/2012	Doctor Suspension	XX1234567	First	Last	OMEPRazole 20MG CAPSULES	ERL	12/26/12 12:01 PM	Consultation Completed:	YES

- Each week RxIntegrity gets a report showing CAP overrides
- We need documentation back from the RXS that they discussed with the pharmacist
- We should not be dispensing any controls and for the example of Dr Pogue his medical license was revoked, so non-control rx's are not valid either

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Customer Service in Regard to GFD Policy

- Intentionally written with grey areas
- Intended to be used as a guideline
- Does not replace sound professional judgment

Suspicious Order Monitoring

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Suspicious Order Monitoring

How normal and expected transactions are identified:

- Accumulation of Receipts over time period - The system accumulates the amount of each controlled substance over the last six weeks.
- Ceiling Limit - Data mining is done across Walgreens retail pharmacies to determine the maximum amount that a pharmacy should be allowed to receive in a rolling six week time period, based on statistical linear regression. The analysis compares like pharmacies across the country based on script volume and determines by drug what would represent unusual quantities.



SOM as it Applies to Cardinal

- Cardinal will limit the entire family of a drug based on monthly purchases
 - example: HC/APAP, Hydromet, Tussionex is all grouped into one
- Orders they flag (ie; your invoice says “Restricted Due to DEA Regulations”) are reported immediately to the DEA
- Cardinal has our sales history by store for the past year, so they can monitor any orders that deviate from the norm
- Anything they deem as suspicious gets cut



All Receipts Count Toward Rolling 6-weeks

- Warehouse
- Interstore – should not be doing this
- Vendor



Best Practices For Ordering

- Review all Controlled Substance receipts before posting
 - Adjust the shipped quantity to “0” if you did not receive
 - Post as short when appropriate
- On-hands
 - Do not falsely increase/decrease on-hands
 - Do not increase/decrease suggested orders
 - Do not manually inflate your orders

Industry Efforts

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Industry Work

- American Pharmaceutical Association (APhA)
- American Academy of Pain Medicine (AAPM)
- American Medical Association (AMA)
- National Association of Chain Drug Stores (NACDS)
- National Association of Boards of Pharmacy (NABP)



Task Forces and Committee Meetings

- If you or your Supervisors are asked to participate
 - Yes, we need your help!
- Contact us before agreeing to participate
 - Tasha Polster or Al Cater
 - We will ensure that you are fully versed or have additional corporate support
- This team work will ensure we continue to build relationships with state agencies and remain a leader in the industry